

Asia Pacific Hernia Society *Newsletter*

July–December 2010

www.aphernia.com

VOLUME NUMBER

3 2

Executive Committee (2009–2011)



Founder President

Pradeep Chowbey,
India



President Elect

Barlian Sutedja,
Indonesia



Joint Secretary

Rey Melchor Santos,
The Philippines



President

Davide Lomanto,
Singapore



Secretary General

Anil Sharma,
India



Treasurer

Wei-Keat Cheah,
Singapore

Executive Members



Michael K.W. Li,
Hong Kong



Sathein Tumtavitikul,
Thailand



Huang Ching Shiu,
Taiwan



Youn Baik Choi,
Korea

Founding Members



T.E. Udawadia,
India



Zheng Minhua,
China



Tatsuo Yamakawa,
Japan



A.Y. Jasmi,
Malaysia



V.N. Shrikhande,
India



Barlian Sutedja,
Indonesia



Pradeep Chowbey,
India



Serafin C. Hilvano,
The Philippines



Davide Lomanto,
Singapore



George K. Kiroff,
Australia



Michael K.W. Li,
Hong Kong



Song Zhang Ma,
China



Wei-Keat Cheah,
Singapore



Kota Okinaga,
Japan



Anil Sharma,
India

Honorary Members



Professor Jean Bernard Flament
France



Professor Jean Henri Alexandre
France



Professor Volker Schumpelick
Germany



Dr Reinhard Bittner
Germany



Dr Robert J. Fitzgibbons
USA



Professor Giampiero Campanelli
Italy

Contents

Message from the President	1
Message from the Founder President	2
Message from the Secretary General	3
Report from the Honorary Treasurer	4
Past Congresses of APHS	5
Forthcoming Congress/Events	6
Research Topics	7
National Chapters of APHS	9
APHS Website	11
Video Library	12
Accreditation and Course endorsement rules	13
APHS Accredited Training Centres	14
Criteria for Membership of APHS	15
APHS Membership Application	16

Newsletter co-ordinators

Aenu Batra, New Delhi, India

Emma Suleiman, Singapore

Editorial and Production Consultants: BYWORD (www.byword.in)
Printed at: Indraprastha Press (CBT), India; Design: Naveen Siromoni



Message from The President

Dear APHS Members,

It is an honour and great privilege to address you as President of our Asia Pacific Hernia Society (APHS). Since the establishment of the APHS, many important steps have been taken to make our Society grow from a small group to almost a thousand members. This brings the APHS leadership in the worldwide panorama with established relations with our European and American counterparts.

The Annual Congress has become an important yearly appointment for all the experts in the region and worldwide. I would like to personally invite all of you to join us in Seoul this coming October 14–16 to share knowledge during the exciting scientific sessions.

Some Centres of Excellence have been recognized regionally among the ones which provide expertise in the field of clinical acumen and education in hernia surgery. This, together with the APHS Fellowship Programme, will enhance the educational activities of our Society. Many of our centres keep up-to-date databases to document their activities on hernia repair. Maintaining databases in the region shall also aid in the evaluation of different hernia repairs,

prosthetics and fixation devices. Synergy with the medical industry will get a boost once such mechanisms are in place.

More achievements can be listed among what we achieved since we found the Society in Bali. My philosophy is to continue to grow and we should always look at the future for new opportunities, new ideas on how to enhance, expand and improve our surgical community with the help and support from all of you.

Please keep in touch by contacting us, surfing our website, and reading our newsletter. Do not hesitate to provide any suggestion or idea you would like APHS to consider; we will look at it.

I wish all of you the best.

Dr Davide Lomanto

President, APHS

Director, Minimally Invasive Surgery Centre

National University Hospital

Singapore



Message from The Founder President

Dear Colleagues,

It is a matter of great pride that from humble beginnings the Asia Pacific Hernia Society (APHS) is now an important organization in the field of hernia repair. We had a dream and a vision in Bali in 2004 and that dream has now taken shape. Along with the American Hernia Society (AHS) and the European Hernia Society (EHS), the APHS has plugged a major lacuna in the field of hernia. Our relations with the AHS and EHS are very good and continue to prosper.

In spite of the expanding reach of the APHS, there are still many countries in the region which are not yet part of our Society. I would encourage our colleagues from these countries to step forward to be part of the APHS. Apart from furthering the science of herniology, such alliances serve to strengthen contacts and improve brotherhood among surgeons and nations.

I would encourage hernia centres in the region to apply for accreditation as APHS centres of excellence in hernia repair. Such an accreditation would not only

provide recognition but would also facilitate training of surgeons in the region in hernia repair.

I am certain that the executive committee of APHS would be very happy to provide faculty for training. The number of publications in hernia from our region is steadily increasing and I am hopeful that this trend will continue in the future.

I can see the APHS gaining from strength to strength in the years to come.

Best regards

Dr Pradeep Chowbey
Founder President, APHS
Joint Managing Director
Director, Institute of Minimal Access, Metabolic
and Bariatric Surgery Centre,
Max Healthcare,
New Delhi, India



Message from The Secretary General

Dear Colleagues,

The Asia Pacific Hernia Society (APHS) is now a vibrant organization with roots spread far and wide in distant and diverse lands of the Asia Pacific region, and even beyond. We are now 891 life members enrolled in the APHS from 26 countries, both within and outside the Asia Pacific region.

The APHS derives its strength and character from its National Chapters. These serve as affiliates to further the mission and vision of APHS—to expand the art and science of herniology. Currently, ten National Chapters are in place and engaged in active academic programmes. The main Congress of APHS is held annually at different locations in the region.

The **APHS hernia fellowship** is available to surgeons interested in advancing their surgical skills in hernia repair. The fellowship is for a duration of 6 months and is stipendiary. (For details see page 14 in this Newsletter.)

Members of APHS with a special interest in hernia repair are invited to accredit their institutions as APHS Centres of Excellence in hernia repair. (More information is given on page 13 in the Newsletter.)

The **APHS website www.aphernia.com** is

available to members for news and information about the Society and its National Chapters. The website also has topical news on hernia and videos by experts on hernia repair.

The **Hernia Journal** is available to APHS members at a special discounted rate of €50.00 for the Web access and €90.00 for the hard copy version.

The Seoul Congress is in progress at the time of distribution of this Newsletter and we have an exciting time in store. The next annual Congress of APHS is scheduled in Thailand in October 2011.

Through this **Newsletter** we aim to disseminate information that is relevant, important and educative to our members.

We eagerly solicit your suggestions and contributions.

Dr Anil Sharma
Secretary General, APHS
Consultant Surgeon
Institute of Minimal Access, Metabolic and
Bariatric Surgery Centre,
Max Super Speciality Hospital, Saket
New Delhi, India



Report from The Honorary Treasurer

The Asia Pacific Hernia Society was created with its mission to develop and propagate hernia care and allied research activities. Since 2005, we have the privilege of having more than 810 life members and 5 corporate members joining us.

The society's fund is made possible by the continual support of the corporate members' yearly renewal as well as the application fee from new life members. In 2009, about 60 new members joined the APHS from various countries such as the Philippines, Indonesia, India, China and the UAE. Expenditures incurred were for administrative fees, postage charges for sending out certificates to our new members, annual income

taxation, and the grant of a \$5,000 fellowship.

Compared to the end of financial year in August 2009, the current APHS fund declined by about 6.6% due to expenditure offsetting the income contribution. The APHS continues to rely on financial support from annual congresses held in various countries and on new life memberships. It is with this sustainable growth that members enjoy the benefits of congregating at annual congresses at discounted registration rates to share their expertise and experiences on hernia surgery.

Dr Wei-Keat Cheah
Honorary Treasurer, APHS

Present Congress

President, Organizing Committee
YOUN BAIK CHOI

Professor, Asan Medical Center, University of Ulsan

Secretary General, Organizing Committee
MIN CHUNG

Professor, Gachon University Gil Hospital

Treasurer and Secretary, Organizing Committee
HO GEUN YOUN

Medical Doctor, Seoul Veterans Hospital

Chairman, Scientific Committee
WOO JUNG LEE

Professor, Yonsei University College of Medicine

Chairman, Registration and Exhibition Committee
DAE HYUN YANG

Professor, Hallym University Medical Center

SANG YOUNG CHUNG

Professor, Chonnam National University Medical School

Chairman, Information Committee
JIN WOO PARK

Professor, Chungbuk National University College of Medicine

www.APHS2010.org / www.aphernia.com

6th International Congress of the
Asia-Pacific Hernia Society
APHS 2010

"Turn and Widen the Hernia Surgery"

October 14 (Thur) ~ 16 (Sat), 2010

EunMyung Auditorium, Severance Hospital, Seoul, Korea





Past Congresses



The 5th APHS Congress, Bali, Indonesia (15–17 Oct 2009)

Theme: Advancing Hernia Management for the Betterment of Patients



The 5th Asia Pacific Hernia Congress (APHS) was organized by the Indonesian Hernia Society. The local organizing

committee was led by Dr Barlian Sutedja, President of the Indonesian Hernia Society and Dr Errawan R. Wiradisuria, President of the Indonesian Society of Endo-Laparoscopic Surgeons (ISES). Apart from these two organizations the 5th APHS was also actively supported by the Indonesian Digestive Surgeons Association (IDSA) and the Indonesian Surgeons Association (ISA).

On 15 October 2009, the first day of the meeting, live surgeries were performed in Jakarta in Gading Pluit hospitals and viewed by the participants of the 5th APHS at the congress venue in Bali. Eight surgeries were performed; three operating theatres were used in two parallel sessions, Inguinal and Ventral Hernia. The surgery operators were Franz Ugahary (the Netherlands), F. Kockerling (Germany), JF. Kukleta (Switzerland), Andy Maleachi (Indonesia), Pradeep K. Chowbey (India), Davide Lomanto (Singapore), and Anil Sharma (India).

1st International GCC Hernia Surgery Congress, Dubai (28–30 April 2010) A mid-term Congress of Asia Pacific Hernia Society (APHS)

The first spring congress of the APHS was held in Dubai, United Arab Emirates. Under the patronage of HH Sheikh Hamdan Bin Rashid Al Maktoum, Deputy Ruler of Dubai, President of Dubai Health Authority and Minister of Finance of UAE, the congress took place in Intercontinental Dubai Festival City from 28 to 30 April 2010. The opening ceremony was honoured by the welcome message of CEO of Sheikh Hamdan Bin Rashid Al Maktoum Award for Medical Sciences, Mr Abdullah Bin Souqat and the President of Emirates Medical Association, Dr Ali Numairy.

During the 3-day congress a total of 429 attendees and 312 regular delegates participated in live surgery sessions transmitted from Dubai Hospital theatres and from MIC Institute Berlin, Germany. TEP, TAPP, PVP and ventral hernia repair including single-port surgery were demonstrated by world experts from the Asia Pacific Region and from Europe.





Forthcoming Congress/Events



2011

The 7th International APHS Congress will be held in Hua-Hin, Thailand, 9-11 November 2011

Event Date, Venue	The 32nd International Congress of the European Hernia Society 6–9 October 2010, Istanbul, Turkey
Event Date, Venue	Chaoyang Hernia Forum 2010 23–24 October 2010, Beijing, China
Event Date, Venue	Autumn and International Surgery Symposium, Taiwanese Hernia Society (Recent Advancement of Hernia Repair) 23 October 2010, Chi Mei Medical Center, Tainan, Taiwan
Event Date, Venue	Hernia Repair Workshop, Taiwanese Hernia Society 20 November 2010, Taipei Veterans General Hospital, Taipei, Taiwan
Event Date, Venue	Hernia Repair Workshop, Taiwanese Hernia Society December 2010, Chia-Yi Christian Hospital, Chia Yi City, Taiwan
Event Date, Venue	Workshop on Laparoscopic Inguinal Hernia, NMC Specialty Hospital, supported by Asia Pacific Hernia Society and GCC Hernia Society 10 December 2010, Sheraton Creek, Dubai
Event Date, Venue	14th Annual Hernia Repair 2011, American Hernia Society 16–19 March 2011, The Palace Hotel, San Francisco, CA, USA
Event Date, Venue	Taiwan Surgical Association Annual Meeting 19–20 March 2011, Taipei Medical University Hospital, Taipei, Taiwan
Event Date, Venue	SAGES Annual Meeting 30 March–2 April 2011, San Antonio Convention Center, San Antonio, TX, USA
Event Date, Venue	19th International Congress of the European Association for Endoscopic Surgery 15–18 June 2011, Torino, Italy
Event Date, Venue	10th Asia Pacific Congress of Endoscopic Surgery (ELSA 2011) 11–13 August 2011, Singapore
Event Date, Venue	The 33rd International Congress of the European Hernia Society 10–13 May 2011, The Netherlands
Event Date, Venue	5th International Hernia Congress, American Hernia Society 28–31 March 2012, New York Marriott Marquis, New York, NY, USA



Research Topics

Compiled by Dr Marilou Blanco Fuentes, Department of Surgery, The Medical City Hospital, Pasig City, The Philippines and Department of Surgery, Minimally Invasive Surgical Centre, National University Health Systems, Singapore

Unilateral TEP repair ... an unfinished job?

Patients presenting with unilateral hernia almost always undergo examination on the contralateral side to check for any occult hernias. The question however remains whether examination alone is reliable enough to detect a contralateral hernia. Surgeons are divided in their opinion on the need to perform a bilateral inguinal hernia repair as prophylactic surgery in order to avoid a second operation.

Studies in favour of performing a bilateral inguinal hernia repair include the one conducted by Bochkarev *et al.* It revealed that of the patients diagnosed with unilateral hernia, 22% had occult hernia on the contralateral side. It was concluded that the likelihood of the presence of occult contralateral hernias was underestimated. The study also noted that occult contralateral hernias were commoner in patients with left-sided inguinal hernias.¹ Sayad *et al.* cited that about 11.2% inguinal hernias remained unidentified on examination. It was suggested that performing contralateral exploration during TEP was safe and did not significantly prolong the operative time. It was found to benefit the patients since it precludes the need for another operation, reduces hospital costs and loss of workdays by the patients.²

On the other hand, some surgeons find performing prophylactic contralateral hernia repair unnecessary.

Saggar *et al.* reported that the incidence of hernia following contralateral exploration was low (1.12%). It was concluded that routine prophylactic repair did not confer added benefits.³ This viewpoint was supported by Uchida *et al.*, who suggested that the occurrence of hernia following TEP repair was low (3.2%). They preferred a repeat TEP for contralateral occurrence.⁴

It can be surmised that the final call lies with the surgeon. Whatever the opinion of the surgeon, it would be worth doing if it is believed that the patient will benefit more.

References

1. Bochkarev V, Ringley C, Vitamyas M, Olevnikov D. Bilateral laparoscopic inguinal hernia repair in patients with occult contralateral inguinal hernia defects. *Surg Endosc* 2007;**21**: 734–6. Epub 2007 Feb 20.
2. Sayad P, Abdo Z, Cacchione R, Ferzli G. Incidence of incipient contralateral hernia during laparoscopic hernia repair. *Surg Endosc* 2000;**14**:543–5.
3. Saggar VR, Sarangi R. Occult hernias and bilateral endoscopic total extraperitoneal inguinal hernia repair: Is there a need for prophylactic repair? Results of endoscopic extraperitoneal repair over a period of 10 years. *Hernia* 2007;**11**:47–9. Epub 2006 Sep 28.
4. Uchida H, Matsumoto T, Ijichi H, Endo Y, Koga T, Takeuchi H, *et al.* Contralateral occurrence after laparoscopic total extraperitoneal hernia repair for unilateral inguinal hernia. *Hernia* 2010;**14**:481–4. Epub 2010 Jun 11.

Mesh repair and testicular perfusion

There is concern that in some male patients, following hernia repair, fertility may be affected. Proper identification of spermatic cord structures and their preservation should ensure that such problems are avoided. Issues regarding the presence of mesh affecting testicular perfusion have been reported in 2005. Dilek *et al.* reported on blood flow indices such as end diastolic velocity (EDV), peak systolic velocity (PSV) and the resistive index (RI) before and after hernia repair. They found that there was no significant difference in testicular perfusion preoperatively and postoperatively.¹

In 2006, Ersin *et al.* published a paper on testicular perfusion after hernia repair. Patients were evaluated preoperatively, on first postoperative day (very early postoperative period), and one week after surgery (early postoperative period). They found a statistically significant difference between the three values in Doppler flow parameters in the laparoscopic group, while the values differed only in the preoperative and early postoperative periods in the conventional group.² No statistical difference in complications was noted postoperatively in both groups.

A prospective randomized study conducted by Koksall *et al.* suggested that hernia repair, whether Lichtenstein or TEP, had no significant effect on testicular perfusion. They evaluated patients using color Doppler ultrasound a day before surgery, on postoperative day 3, and 6 months after the surgery (late postoperative period).³

References

1. Dilek ON, Yucel A, Akbulut G, Degirmenci B. Are there adverse

Fix or Glue ... an update

The important factors to prevent recurrence of hernia are identification of all hernia defects, use of the standard mesh size that will cover the defect and good fixation. The standard size of mesh used is 15 cm x 10 cm, which is thought to be sufficient to cover all the possible hernial defects such as direct, indirect and femoral hernia. For ventral hernia, an adequate margin of mesh overlap is essential. Though fixation of the mesh is important, this leads to postoperative pain. The use of tacks and fibrin glue have been studied in the context of hernia recurrence and pain.

Graziano *et al.* compared fibrin sealant with staple for mesh fixation in laparoscopic inguinal hernia repair. They assessed postoperative pain, recurrences and complications. It was found that recurrence rates, hospital costs and duration of stay were the same for both types of fixation, but the use of fibrin glue was associated with better outcomes in terms of postoperative pain, seroma formation and trocar-related trauma.¹ Schwab *et al.* supported the fibrin group and concluded that it was as effective as the use of staplers with regards to securing mesh and prevention of recurrence and has an advantage of having less pain postoperatively.²

Postoperative pain is an important consideration following ventral/incisional hernia repair. For many surgeons, postoperative pain following ventral/incisional hernia repair is the primary concern. Recurrence of hernia remains the other concern following hernia repair.

Schuq-Pass *et al.* investigated the use of fibrin glue to fix mesh. They suggested that there is a risk for mesh dislocation if the peritoneum is intact. They mentioned that fibrin glue has significantly less strength for fixation

effects of herniorrhaphy techniques on testicular perfusion? Evaluation by color Doppler ultrasonography. *Urol Int* 2005;**75**:167–9.

2. Ersin S, Aydin U, Makay O, Icoz G, Tamsel S, Sozbilen M, *et al.* Is testicular perfusion influenced during laparoscopic inguinal hernia surgery? *Surg Endosc* 2006;**20**:685–9. Epub 2006 Mar 7.
3. Koksall N, Altinli E, Sumer A, Celik A, Onur E, Demir K, *et al.* Impact of herniorrhaphy technique on testicular perfusion: Results of a prospective study. *Surg Laparosc Endosc Percutan Tech* 2010;**20**:186–9.

(11.86 N vs. 47.88 N). Therefore, there is a need for either sutures or tacks until there is complete disintegration of the mesh material.³ Randomized trial of three fixation techniques was done by Eelco *et al.* They evaluated pain and quality of life (QoL) after laparoscopic ventral/incisional hernia repair. They concluded that the use of absorbable sutures (AS) with tacks, double crown technique without sutures, and non-absorbable sutures (NS) with tacks as methods of fixation have no significant difference in pain scores together with the QoL. Assessment of pain using VAS (visual analog score) was done at 2 weeks, 4 weeks and 3 months after surgery. The QoL seemed to improve 3 months after surgery. The authors suggested development of newer methods for mesh fixation to reduce postoperative pain following mesh repair.⁴

References

1. Graziano C, Luciano C, Massimo CP, Alberto B, Lelio DZ, Alessandro S, *et al.* Comparing fibrin sealant with staples for mesh fixation in laparoscopic transabdominal hernia repair: A case–control study. *Surg Endosc* 2008;**22**:668–73.
2. Schwab R, Willms A, Kroger A, Becker HP. Less chronic pain following mesh fixation using a fibrin sealant in TEP inguinal hernia repair. *Hernia* 2006;**10**:272–7.
3. Schuq-Pass C, Lippert H, Kockerling F. Fixation of mesh to the peritoneum using fibrin glue: Investigation with a biomechanics model and an experimental laparoscopic porcine model. *Surg Endosc* 2009 May 23.
4. Wassenaar E, Schoenmaeckers E, Raymakers J, van deer Palen J. Mesh-fixation method and pain and quality of life after laparoscopic ventral or incisional hernia repair: Randomized trial of three fixation techniques. *Surg Endosc* 2010;**24**:1296–302. Epub 2009 Dec 24.

Edited by Dr Khoobsurat Najma, Max Institute of Minimal Access, Metabolic and Bariatric Surgery Centre, Max Super Speciality Hospital, Saket, New Delhi



National Chapters



Dr Youn Baik Choi (**President**)

The Korean Hernia Society



Dr Min Chung (**Secretary General**)

The Korean Hernia Society was founded at Seoul on 9 September 2006 during the first annual meeting with almost 100 Members. Dr Youn Baik Choi and Dr Min Chung were elected as president and secretary general, respectively. The society has been regularly holding live demonstration/workshops and symposiums.

The 3rd Congress of Korean Hernia Society and general assembly was held on 30 August 2008 at Soonchunghyung University Hospital, Seoul. The 4th Congress of the Korean Hernia Society and general assembly was held on 29 August 2009 in Seoul.



Dr H.G. Doctor (**President**)

The Hernia Society of India

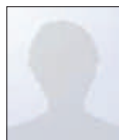


Dr Rajesh Khullar (**Honorary Secretary**)

The Hernia Society of India (National Chapter of APHS) was formed in October 2006 during the 2nd APHS Congress at New Delhi (President Dr H.G. Doctor; Honorary Secretary Dr Rajesh Khullar). The Society has about 700 members.

The first National Hernia Congress and Live Workshop of the Hernia Society of India was held in New Delhi on 14–16 December 2007. It was organized by the Minimal Access, Metabolic and Bariatric Surgery Centre, Sir Ganga Ram Hospital. The South Zone Conference of the Hernia Society of India was held on 4–5 April 2008 at V.G. Hospital, Coimbatore. The Second Annual National Congress of the Hernia Society of India was held at Aurangabad on 4–5 October 2008. The 3rd Annual Congress of the Hernia Society of India was held on 22–23 August 2009 at Indore. The Mid-term Zonal Conference of HSI was held on 26–27 June 2010 at Bangalore.

The Fourth Annual Congress of HSI was held on 17–19 September 2010 at Kolkata. The theme was 'Hernia Solution for Masses'. (Further information can be viewed at www.hsi-aphs.com.)



Dr Loong Che-Chuan (**President**)

The Taiwanese Hernia Society (THS)



Dr Tien-Hua Chen (**Secretary General**)

The THS was founded on 7 April 2007 at Taipei, Taiwan, with 250 charter members from different surgical subspecialties, i.e. general surgery, urology, plastic surgery. The THS organizes two nation-wide hernia conferences in March and November/December each year. The 17th Asian Congress of Surgery was held in March 2009 at Taipei. Regular hernia workshops are held by THS at different parts of the country including 265 surgeons attending the scrub-in teaching. Some forthcoming events include: (i) THS Autumn and International Surgery Symposium (Recent Advancement of Hernia Repair) at Chi Mei Medical Center, Tainan (23 October 2010); (ii) Hernia Repair Workshop at Taipei Veterans General Hospital, Taipei (20 November 2010); (iii) Hernia Repair Workshop at Chia-Yi Christian Hospital, Chia Yi City (December 2010); (iv) Taiwan Surgical Association Annual Meeting at Taipei Medical University Hospital, Taipei (19–20 March 2011).

Dr Sathien Tumtavitikul (**President**)

The Thai Hernia Society

Dr Vitoon Chinswangwatanakul (**Secretary General**)

The Thai Hernia Society has conducted many local workshops for tension-free herniorrhaphy in various local hospitals throughout the country, and demonstrated surgical techniques in local ORs. Speakers were also provided on hernia sessions for the Royal College of Surgeons of Thailand meeting in Krabi, in February 2009, and for the Surgical Society of Thailand meeting in Bangkok in May 2009. The official opening of the Thai Hernia Society was celebrated on 14 May 2009 in Bangkok. Guidance is provided for tension-free hernia repair to surgeons throughout the country.

A hernia workshop was held at the Pre-Congress Meeting of the Royal College of Surgeons of Thailand in July 2009 at Pattaya.

Dr Rolf Hartung (**President**)

The UAE-GCC Hernia Surgery Interest Group

Dr D. Basim Al Khafaji (**Secretary General**)

A chapter of the APHS was created in UAE-GCC. This chapter is called GCC Hernia Surgery Interest Group, which is in the process of applying for accreditation as centre of excellence for hernia surgery in Dubai Hospital. A workshop on Mesh Repair for Umbilical Hernia was organized on 27 May 2008 and the guest was Dr Tim Tollens from Bonheiden-Belgium. Some members travelled to Beijing to attend the 2008 annual conference of APHS. A delegation of UAE attended the annual conference 2009 in Bali as well. The 1st International GCC Hernia Surgery Congress (A Mid-Term Congress of APHS) was held in Dubai, United Arab Emirates on 28–30 April 2010 under the patronage of HH Sheikh Hamdan Bin Rashid Al Maktoum, Deputy Ruler of Dubai, President of Dubai Health Authority and Minister of Finance of UAE. A Workshop on Laparoscopic Inguinal Hernia will be held in Dubai on 10 December 2010 and will be organized by NMC Specialty Hospital in association with APHS and GCC Hernia Society.

Dr Kota Okinaga (**President**)

The Japanese Hernia Society

Dr Tsuyoshi Inaba (**Secretary General**)

The Japanese Hernia Society has 375 members.

The 7th Annual Congress of the Japanese Hernia Society was held in Tokyo on 10–11 April 2009. This meeting was attended by 400 participants and had 181 speeches including several special lectures, educational lectures, and active discussions. The current topics included inguinal hernia and abdominal incisional hernia.

A modified, new classification of groin hernia was proposed at this meeting.





The Singapore Hernia Society

Dr Charles T.K. Tan (**President**)

Dr _____ (**Secretary General**)



One of the objectives of the Singapore Hernia Society is to further the learning of art and science of hernia surgery for surgical trainees and practising surgeons. Towards achieving this goal, the first dedicated hernia workshop was organized at the Advanced Surgical Training Centre (ASTC) at the National University Hospital (NUH) in 2003. Since then, we have conducted yearly courses in abdominal wall surgery—laparoscopic and open approaches, involving world-experienced hernia specialists and attracting participants, both local and from overseas. In 2010, one of the 'hot topics' in the courses was single-port access. Since its inception—despite the small size of Singapore—the Hernia Society has grown to a family of senior and junior surgeons in the public and private hospitals.



The Chinese Hernia Society

Dr Song Zhang Ma (**President**)

Dr Tang Jian Xiong (**Secretary General**)



The 4th International Congress of the Asia-Pacific Hernia Society was held on 31 October–3 November 2008 at the Crowne Plaza Park View Wuzhou Beijing, China. The Society will be organizing Chaoyang Hernia Forum 2010 on 23–24 October 2010 at Beijing, China. To push the development of tension-free herniorrhaphy, standardize the operational techniques, reduce and prevent complications, and show the latest advancement of hernia and abdominal wall surgery, the organizers are looking forward to bring together an impressive group of internationally renowned experts in the area of hernia and abdominal wall surgery, who will present the latest scientific developments. Dr Song Zhang Ma is the Organizing Chairman.



The Indonesian Hernia Society

Dr Barlian Sutedja (**President**)

Dr Errawan R. Wiradisuria (**Deputy and Secretary**)



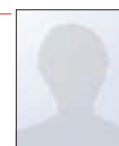
The 5th International Congress of the Asia-Pacific Hernia Society (APHS) was held on 15–17 October 2009 at Discovery Kartika Plaza Beach Hotel, Bali, Indonesia.



The Philippine Hernia Society

Dr Rey Melchor Santos (**President**)

Dr _____ (**Secretary General**)



APHS Website (www.aphernia.com)

The APHS website was initially conceptualized and created by Dr Davide Lomanto at Singapore. In 2005, this task was entrusted to Dr Anil Sharma. Since then the website is being designed and maintained from New Delhi, India. The website features comprehensive lists of general members, executive members and office bearers of the APHS. Information on the *Hernia Journal* and links with



related organizations are provided. The Video gallery features crisp edited short videos on groin and ventral/ incisional hernia repair (both conventional and laparoscopic/ endoscopic) performed by international experts. A corporate corner is in place where it is envisaged that hernia-related products would be displayed by various medical corporates.



Video Library



Title: Endoscopic Totally Extraperitoneal Repair (TEP)
Operating surgeon: Dr Pradeep Chowbey, India
Description: Second Asia Pacific Hernia Congress and Live Workshop, Sir Ganga Ram Hospital, New Delhi (India)



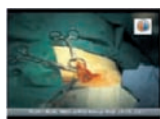
Title: Laparoscopic Transabdominal Preperitoneal Repair (TAPP)
Operating surgeon: Dr Jan F. Kukleta, Switzerland
Description: Second Asia Pacific Hernia Congress and Live Workshop, Sir Ganga Ram Hospital, New Delhi (India)



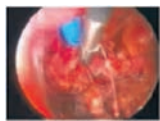
Title: Endoscopic Totally Extraperitoneal Repair (TEP)
Operating surgeon: Dr F. Kockerling, Germany
Description: Second Asia Pacific Hernia Congress and Live Workshop, Sir Ganga Ram Hospital, New Delhi (India)



Title: TEP Bilateral Hernia Repair
Operating surgeon: Dr Davide Lomanto, MD, PhD
Description: Dept. of General Surgery "P. Stefanini" University of "La Sapienza" Rome (Italy)



Title: Prolene Hernia System (PHS)
Operating surgeon: Dr Davide Lomanto, MD, PhD
Description: NUH MISC Hernia Workshop



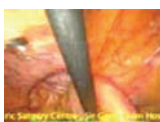
Title: TEP Hernia Repair using Anatomic Mesh
Operating surgeon: Dr Davide Lomanto, MD, PhD
Description: Director MISC, National University Hospital, Singapore



Title: Lichtenstein Hernia Repair
Operating surgeon: Dr Cheah Wei-Keit
Description: Deputy Director of the MISC, Head of the Division of General Surgery, National University Hospital, Singapore



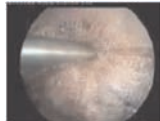
Title: The Ugahary Grid-Iron Technique with VYPRO II* Visor Mesh
Operating surgeon: Dr F. Ugahary
Description: Consultant Surgeon, The Netherlands



Title: Laparoscopic Repair of Suprapubic Hernia
Operating surgeon: Dr Anil Sharma, India
Description: Minimal Access, Metabolic and Bariatric Surgery Centre



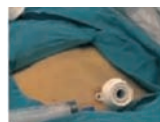
Title: Total Extraperitoneal Approach for Femoral Hernia
Operating surgeon: Dr Pradeep Chowbey, India
Description: Minimal Access, Metabolic and Bariatric Surgery Centre



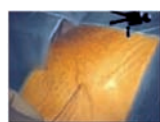
Title: Laparoscopic Ventral Hernia Repair (LVHR)
Operating surgeon: Dr Davide Lomanto, Singapore
Description: Second Asia Pacific Hernia Congress and Live Workshop, Sir Ganga Ram Hospital, New Delhi (India)



Title: Laparoscopic Incisional Hernia Repair (LVHR)
Operating surgeon: Dr Anil Sharma, India
Description: Second Asia Pacific Hernia Congress and Live Workshop, Sir Ganga Ram Hospital, New Delhi (India)



Title: Endoscopic Totally Extraperitoneal Repair (TEP)
Operating surgeon: Dr Andrew Bowker, New Zealand
Description: Second Asia Pacific Hernia Congress and Live Workshop, Sir Ganga Ram Hospital, New Delhi (India)



Title: Lichtenstein Groin Hernia Repair with Glue
Operating surgeon: Professor Giampiero Campanelli
Description: Associate Professor of Surgery - General Surgery - University of Milan, Italy



Title: Laparoscopic Repair of Large Recurrent Ventral Hernia
Operating surgeon:
Description: Minimally Invasive Surgical Centre, National University Hospital, Singapore



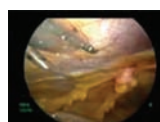
Title: Laparoscopic Ventral Hernia Repair
Operating surgeon: Dr Davide Lomanto, MD, PhD
Description: Director MISC, National University Hospital, Singapore



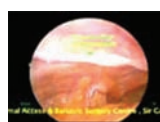
Title: TEP Hernia Repair using Anatomic Mesh
Operating surgeon: Dr Davide Lomanto, MD, PhD
Description: Director MISC, National University Hospital, Singapore



Title: Laparoscopic Umbilical Hernia Repair
Operating surgeon: Dr Davide Lomanto, MD, PhD
Description: Director MISC, National University Hospital, Singapore



Title: Transabdominal Extraperitoneal Approach for Epigastric Hernia
Operating surgeon: Dr Anil Sharma, India
Description: Minimal Access, Metabolic and Bariatric Surgery Centre



Title: Transabdominal Preperitoneal Repair of Recurrent Hernia (Post TEP)
Operating surgeon: Dr Rajesh Khullar, India
Description: Minimal Access, Metabolic and Bariatric Surgery Centre

log on to <http://www.aphernia.com/media/vidiogallery.htm> to access these videos



Asia Pacific Hernia Society

Accreditation of Centre of excellence in hernia and Course endorsement rules

PREREQUISITES

In order to be considered for endorsement of an APHS Centre of excellence and for an educational course, the centre must meet the following criteria:

1. The Course must be directed or coordinated by a member of the APHS.
2. The Centre must offer a variety of hernia repair of both open and laparoscopic techniques with clinical outcome audited or published in peer-reviewed journals.
3. Three or more courses must be held per year at the Centre/Hospital in the surgical fields and at least two hernia courses per year.
4. The Centre must be equipped with adequate facilities for lectures and hands-on training on dry and wet facilities. Virtual surgical simulators are optional. If live tissue training is involved, this must follow the worldwide accepted rules for a good record of animal care (see IACUC guidelines at www.iacuc.org).
5. The course director and faculty members must have appropriate clinical and/or laboratory expertise to educate the participants. If live surgery procedures are performed, instructors must have adequate clinical experience in those procedures.
6. The Curriculum of the Centre/Course must teach and include: Patient selection; Instrumentation; Clinical outcome; Surgical procedures and technique; Follow-up; Pre- and postoperative care, Complications, etc.
7. The Institution organizing the course must offer CME credits.

Note:

1. The APHS endorsement is only for the Course related to Hernia and Abdominal Wall Surgery and is valid for one year only, and can be renewed after review.
2. All brochures and lists of faculty members must be submitted to the APHS office for annual review. Feedback from the participants of each Course must be collected and reported to the APHS for evaluation.
3. The endorsement of the Training Centre will be suspended if the review shows that a particular course is below the prescribed standards and if deficiencies are not corrected following notification by the APHS.
4. An Application fee is required.

BENEFITS

1. The endorsed Centre will be listed on the APHS website.
2. The Courses will be promoted and listed on the APHS website.
3. The Course Director may include the APHS Endorsement Statement on promotional brochures and course materials.
4. The Centres and Courses will be promoted during the APHS Annual Meetings.

REQUIREMENTS

1. Provide all the required information.
2. A letter from the institution's animal care committee or similar body to certify the approval of live tissue procedures.
3. Printed materials (syllabus, reprints, CD-Rom, videos, etc.) distributed during the course.
4. Brochures of two previous courses organized at the institution/Centre applying for course endorsement.
5. Evaluation results for at least two courses previously organized at the institution/Centre applying for course endorsement.
6. An Application Fee of US\$ 300 (valid for one year only). The application fee is not reimbursed if the endorsement is not approved.

Please submit your application (three copies) with all the required information and the application fee to:

APHS Secretariat, c/o MISC, National University Hospital, Kent Ridge Wing Level 2, 5 Lower Kent Ridge Road, 119074 Singapore. Tel: +65 6772 2967; Fax: +65 6774 6077; e-mail: info@aphernia.com



Accredited Training Centres

1. Max Institute of Minimal Access, Metabolic and Bariatric Surgery Centre, Max Super Speciality Hospital, Saket, New Delhi, India

Max Institute of Minimal Access, Metabolic and Bariatric Surgery is on the international map and recognized to be a centre of excellence in endosurgery in the world today. The Institute comprises surgeons who specialize in various areas of surgery and are dedicated to performing surgical procedures with emphasis on utilization of minimal access techniques so that patients reap the benefits of faster recovery, lesser postoperative pain and minimal post-surgical complications. The Institute is equipped with state-of-the-art operation theatres and quality equipment that contribute in affirming best-in-industry practices. In an effort to provide high quality practical training, our Institute established an intensive course focusing on the latest technology and development in Endohernia Surgery.

2. The Minimally Invasive Surgical Centre (MISC), National University Hospital, Singapore

The Centre was established at the National University Hospital in 1993 to promote and develop training, clinical and research activities in the field of endoscopic surgery. The MISC is recognized worldwide for its excellence in training and proctoring for laparoscopic surgery including abdominal wall surgery.

The MISC Training Centre is equipped with all facilities such as hands-on setting, animal laboratory facilities, interactive video-library, 3-D graphics models, etc. A Simulation Training Laboratory (STL) with VR Surgical Simulators and broadcasting facilities provides all participants with high-technological training activities. The simulators include training programme for ventral hernia repair. (For more information log on to www.misc-asia.com)

Information required for accreditation of centre of excellence in hernia

NAME

Location:

Director:

Activities:

Faculty (including CV):

Type of hernia repair performed:

Recurrence for different types of hernia and major clinical outcome (post-op pain, wound infection rate; seroma; mesh infection; etc.)

Please provide a brief description (including pictures) of the classroom facilities, including number of rooms available for lectures, approximate number of seats in each room, audiovisual capabilities, teleconference facilities, etc.

Type of Educational Activities (repeat for every course)

Title of the Course:

Faculty (including CV):

Lectures:

Live Surgery

Hands-on experience on Dry Tissue

Hands-on experience on Wet Tissue

Surgical Simulators

APHS Hernia Fellowship programme

The APHS Hernia Fellowship programme shall be for a duration of 6 months in accredited APHS Centres. The Fellow shall submit a research programme to be completed during the Fellowship and presented at the annual APHS Congress.

This fellowship will be financially supported by an APHS grant of 5000 Sing Dollar or equivalent. A Scientific Committee shall select candidates for the fellowship programme. For further information, please contact with a detailed CV at the APHS Secretariat in Singapore.



Criteria for Membership of APHS

Our membership consists primarily of surgeons from the Asia Pacific region who have a special interest in hernia surgery and use either an open and/or a laparoscopic technique.

We encourage you to enroll in the APHS. The benefits for Members include: To be part of a vibrant and dynamic group of surgeons with a wealth of experience which they are eager to share with you and discuss about new advancements in hernia surgery; continuous medical education programmes organized around the year where you can participate at discounted rates. Moreover, a dynamic website will provide an active forum for all members. A special discounted subscription to *Hernia* (a worldwide renowned journal) will be available for all Members. Members can also avail discounted rates at the congresses organized by the three major hernia societies.

Membership of the Society shall be in three categories:

- Honorary Member
- Life Member
- Corporate Member

Honorary Member

- The Honorary Member would have made outstanding contribution to the progress of hernia surgery in the Asia Pacific region or be a person of distinction.
- The Executive Committee may confer an Honorary Membership to any person who, in the opinion of the Committee, has rendered valuable services to the Society.
- Prior to granting Honorary Membership, the Executive Committee shall first propose the name of the person at the General Meeting, and upon the said Meeting accepting the proposal, the said Honorary Membership may be bestowed.

- Honorary Members shall not be required to pay any Entrance Fee or Subscription Fee.
- Honorary Members shall have no voting rights and shall not be eligible to hold office in the Executive Committee or to participate in the management of the Society.

Life Member

- Life Members may be elected by application from qualified specialists (certified by a National Board) who are involved in hernia surgery.
- Each applicant shall be proposed by one Life Member and seconded by another Life Member. The application should be sent to the Secretary General.
- The Executive Committee will decide on the application for Life Membership by a simple majority vote.
- Life Members are eligible to vote at General Meetings and hold office in the Executive Committee.
- The Life Membership fee shall be US\$ 100.

Corporate Member

- Corporate Members may be elected by application from companies with an interest in Hernia.
- The Executive Committee will decide on the application for Corporate Membership by a simple majority vote.
- Each Corporate Member shall be represented by one nominee from the said Company.
- Corporate Members are eligible to vote at General Meetings. All Corporate Members can be represented in the Executive Committee by two representatives, chosen among all the representatives by the Executive Committee Members.
- Each Corporate Member must propose one representative for the Executive Committee.
- The Annual Subscription for Corporate Members shall be US\$ 200.
- The Entrance Fee for Corporate Members shall be US\$ 3000.



APHS Membership Application

Please complete the following, enclose your CV and send to the Secretary General at the APHS Secretariat:

Asia Pacific Hernia Society (APHS)

c/o MISC – Department of Surgery, National University Hospital, 5 Lower Kent Ridge Road, Singapore 119074

Tel: +65 6772 2967, Fax: +65 6774 6077, e-mail: info@aphernia.com

This is an application for: Life Member US\$ 100 Corporate Member
(Entrance Fee US\$ 3000,
Annual Subscription US\$ 200)

Applicant / Member's name:

Title: Prof/ Dr/ Mr/ Ms

First Name: Middle Name: Last Name:

Please tick preferred mailing address

Office Address:

Name of Institution/Hospital/Corporate: Position held:

Address:

City: Country: Postal Code

Tel: Fax: Mobile:

e-mail:

Residential Address

Address:

City: Country: Postal Code

Tel: Fax: Mobile:

e-mail:

Proposer 1. Name: Membership No.

Proposer 2. Name: Membership No.

Payment method:

by cheque / bank draft number (Please make payment in favour of the Asia Pacific Hernia Society)

by Telegraphic Transfer

Beneficiary Bank's Name: **DBS Bank Ltd, Singapore**

SWIFT Address: DBSSSGSG

CHIPS UID Number: 034675

Or Telex Number: RS 24455

Beneficiary Bank's Address: 6 Shenton Way, DBS Building, Singapore 068809

Beneficiary Bank's Account: 063-900616-0

Beneficiary Name: Asia Pacific Hernia Society

For TT in USD: The Agent Bank is Bank of New York, New York (ABA/Routing # 021000018)



Advertisement Rates: Newsletter/Website

FOR THE PRINT ISSUE

Page	Single issue (US\$)	Two issues (US\$)
Inside front cover – colour	800	1200
Inside back cover – colour	600	1000
Special position* – colour	500	750
Inside full page – colour	300	500

*First page, page facing editorial board, page facing table of contents. Cover page advertisements not available for a single issue.

Schedule

The APHS Newsletter would be published half yearly (two issues per year).

Advertisement material along with purchase order and payment should reach us at least four weeks before the scheduled print date.

FOR THE WEBSITE (www.aphernia.com)

These ads shall have a link to our website. The ads can be in jpg, gif, animgif or flash format with the file size limit of 15–18 kb. The ads shall be in following slots. For any other technical assistance, please contact us.

Banner (B) advertisement (468px x 60px)		Panel (P) advertisement (200px x 200px)	
3 months	US\$ 500	3 months	US\$ 250
6 months	US\$ 750	6 months	US\$ 350
12 months	US\$ 1000	12 months	US\$ 500

Payment details

Payment should be made through a Demand Draft in favour of the “Asia Pacific Hernia Society” and payable at Singapore. Payment to be done at the time of submitting the advertisement material / booking the advertisement. Please send your advertisement request, payment and advertisement material to

The Asia Pacific Hernia Society (APHS)
c/o MISC – Department of Surgery, National University Hospital,
5 Lower Kent Ridge Road, Singapore 119074

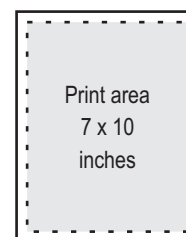
The Editorial Board reserves the right to accept or decline any advertisement.

Technical details

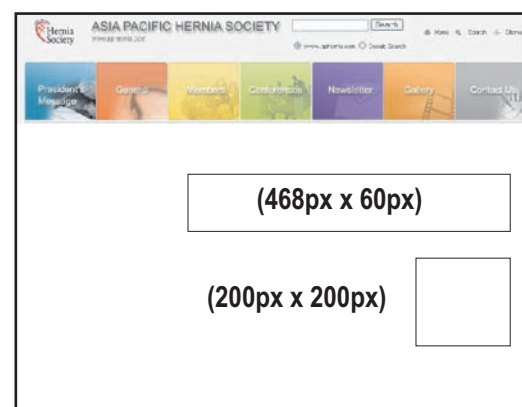
Paper size	8.5 x 11 inches
Print size	7 x 10 inches
Screen for positives	133 to 170 dpi
Digital file format	EPS on CD (at 300 dpi resolution)

Printing material to be provided as positives (transparency) along with good quality color proofs.

Page size 8.5 x 11 inches



Banner/Panel Proportions





APHS Secretariat:

Minimally Invasive Surgical Centre (MISC), National University Hospital,
Department of Surgery, Level 2, Kent Ridge Wing 2, 5 Lower Kent Ridge Road,
Singapore 119074 :: Tel: +65 6772 2967 Fax: +65 6774 6077
e-mail: info@aphernia.com :: MISC website: www.aphernia.com

Editorial Office:

AYUSHMAN, D.S. Market, R-Block, New Rajinder Nagar,
New Delhi 110060, India
Tel: +91-9999668200 / +91-9999668700
e-mail: info@aphernia.com :: website: www.aphernia.com